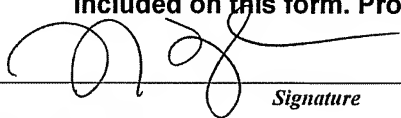


|  |                                      |   |   |                               |                                 |  |  |   |  |   |  |
|--|--------------------------------------|---|---|-------------------------------|---------------------------------|--|--|---|--|---|--|
| <b>AMENDMENT TRANSMITTAL LETTER (Small Entity)</b>   |                                      |   |   | Docket No.<br><b>19746</b>    |                                 |  |  |   |  |   |  |
| Applicant(s): <b>Larry D. Ward, et al.</b>   |                                      |   |   |                               |                                 |  |  |   |  |   |  |
| Application No.<br><b>10/575,928</b>   | Filing Date<br><b>March 22, 2007</b> | Examiner<br><b>Nicole Erin Kinsey White</b> | Customer No.<br><b>23389</b>  | Group Art Unit<br><b>1648</b> | Confirmation No.<br><b>7073</b> |  |  |   |  |   |  |
| Invention: <b>POXVIRUS VECTOR ENCODING RETROVIRUS AND CYTOKINE</b>   |                                      |   |   |                               |                                 |  |  |   |  |   |  |
| <u>COMMISSIONER FOR PATENTS:</u>   |                                      |   |   |                               |                                 |  |  |   |  |   |  |
| Transmitted herewith is an amendment in the above-identified application.  |                                      |   |   |                               |                                 |  |  |   |  |   |  |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27  |                                      |   |   |                               |                                 |  |  |   |  |   |  |
| The fee has been calculated and is transmitted as shown below.   |                                      |   |   |                               |                                 |  |  |   |  |   |  |
| <b>CLAIMS AS AMENDED</b>   |                                      |   |   |                               |                                 |  |  |   |  |   |  |
|  | CLAIMS REMAINING<br>AFTER AMENDMENT  | HIGHEST #<br>PREV. PAID FOR                 | NUMBER EXTRA<br>CLAIMS PRESENT  | RATE                          | ADDITIONAL<br>FEE               |  |  |   |  |   |  |
| TOTAL CLAIMS   | 27 -                                 | 71 =  | 0   | x \$26.00                     | \$0.00                          |  |  |   |  |   |  |
| INDEP. CLAIMS  | 3 -                                  | 7 =   | 0   | x \$110.00                    | \$0.00                          |  |  |   |  |   |  |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/>   |                                      |   |   |                               | \$0.00                          |  |  |   |  |   |  |
| <b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>   |                                      |   |   |                               | <b>\$0.00</b>                   |  |  |   |  |   |  |
| <input type="checkbox"/> No additional fee is required for amendment.<br><input checked="" type="checkbox"/> Please charge Deposit Account No. <b>191013</b> in the amount of <b>\$0.00</b><br><input checked="" type="checkbox"/> A check in the amount of <b>\$0.00</b> to cover the filing fee is enclosed.<br><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No.<br><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.<br><input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.<br><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.<br><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b> |                                      |   |   |                               |                                 |  |  |   |  |   |  |
| <br>_____<br>Xiaochun Zhu<br>Registration No. 56,311<br>Scully, Scott, Murphy, & Presser, P.C.<br>400 Garden City Plaza, Suite 300<br>Garden City, NY 11530<br>(516) 742-4343<br><br>XZ/JRM:eb  |                                      |   | Dated: <b>November 8, 2010</b>  |                               |                                 |  |  |   |  |   |  |
| CC:  |                                      |   | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">         I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on<br/><br/>         _____<br/>         (Date)       </td> </tr> <tr> <td colspan="2" style="text-align: center;">         _____<br/>         Signature of Person Mailing Correspondence       </td> </tr> <tr> <td colspan="2" style="text-align: center;">         _____<br/>         Typed or Printed Name of Person Mailing Correspondence       </td> </tr> </table> |                               |                                 | I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on<br><br>_____<br>(Date) |  | _____<br>Signature of Person Mailing Correspondence |  | _____<br>Typed or Printed Name of Person Mailing Correspondence |  |
| I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on<br><br>_____<br>(Date)   |                                      |   |   |                               |                                 |  |  |   |  |   |  |
| _____<br>Signature of Person Mailing Correspondence  |                                      |   |   |                               |                                 |  |  |   |  |   |  |
| _____<br>Typed or Printed Name of Person Mailing Correspondence  |                                      |   |   |                               |                                 |  |  |   |  |   |  |